

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

ADDRESS (number and street) ▼

7000 Cardinal Place

☐ Check if different than previously reported. (ACC)

Dublin

OH

43017

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00332833

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☐ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

☐ July 31 Mid-Year Report (Non-election Year Only) (MY)

☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2014

through

M M M / D D D / Y Y Y Y Y Y
03 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Cassi Baker

Signature of Treasurer

Cassi Baker

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 14 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2014		195281.27
(b) Cash on Hand at Beginning of Reporting Period.....	247753.62	
(c) Total Receipts (from Line 19)	25374.56	77896.91
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	273128.18	273178.18
7. Total Disbursements (from Line 31)	39000.00	39050.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	234128.18	234128.18
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

11569.26

27535.79

(ii) Unitemized

13774.68

50262.72

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

25343.94

77798.51

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

25343.94

77798.51

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

30.62

98.40

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

25374.56

77896.91

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

25374.56

77896.91

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	50.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	50.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	35000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	4000.00	4000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	39000.00	39050.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39000.00	39050.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25343.94	77798.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25343.94	77798.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	50.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. OLA M SNOW

Mailing Address 267 DONERAIL AVE

City State Zip Code
POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR BUS PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR10055349871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KELLI M KOVAK

Mailing Address 195 N HARBOR DR #802

City State Zip Code
CHICAGO IL 60601

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGY MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR11742639871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROSEMARY PITTS

Mailing Address 8673 FINLARIG DR.

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, FINANCE (GENERAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR11872539871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

252.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM C PUTNAM

Mailing Address 7812 W. 147TH TERRACE

City State Zip Code
OVERLAND PARK KS 66223

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, SCIENTIFIC CONSU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR12065999871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TIFFANY P OLSON

Mailing Address 15402 HIDDEN OAKS LANE

City State Zip Code
CARMEL IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
PRESIDENT, NUCLEAR &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR12067019871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JENNIFER R FERRANG

Mailing Address 24 RAMSEY ROAD

City State Zip Code
LEBANON NJ 08833

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR12278779871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

536.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 8 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. THOMAS NOVELLI

Mailing Address 6486 SUTCLIFFE DRIVE

City State Zip Code
 ALEXANDRIA VA 22315

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, GOVERNMENT RELAT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR12284069871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LINDA S LOCKYER

Mailing Address 1133 NOE STREET

City State Zip Code
 SAN FRANCISCO CA 94114

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8737789871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RONALD A A DEDELS

Mailing Address 1080 BIG WATER POINT

City State Zip Code
 GREENSBORO GA 30642

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8737809871

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

212.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. LISA A ASHBY

Mailing Address 605 MUIRFIELD CT

City State Zip Code
AUGUSTA GA 30907

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, MED DEVICE & D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8738009871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. BENJAMIN T N T THOMPSON

Mailing Address 2029 LEWIS CROSSING COURT

City State Zip Code
KELLER TX 76248

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

NVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8738149871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID A GOLDSBERRY

Mailing Address 321 ST ANDREWS LN

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8738219871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

252.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL L L GROESBECK

Mailing Address 33916 N SUMMERFIELDS DR

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
SVP, QRA MEDICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8738239871

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DEBRA L SCHOTZ

Mailing Address 2351 THORNWOOD AVENUE

City State Zip Code
WILMETTE IL 60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
SVP, GM PERIOPERATIV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8738279871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STEPHEN A A INACKER

Mailing Address 1490 S RIDGE ROAD

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
PRES, HOSPITAL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8738359871

Amount of Each Receipt this Period

77.88

P/R Deduction (\$38.94 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

257.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. SUSAN J JACOBSON

Mailing Address 65 EAST MONROE
#4606

City State Zip Code
CHICAGO IL 60603

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8738459871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KATE C SPIRKO

Mailing Address 6812 SPRUCE PINE DR

City State Zip Code
COLUMBUS OH 43235

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HR SERVICE CENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8738519871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RACHEL R R STOLL

Mailing Address 4228 ST. ANDREWS BLVD

City State Zip Code
IRVING TX 75038

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8738539871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 12 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. RENE BLOCH

Mailing Address 401 SPRING DRIVE

City State Zip Code
 YORKTOWN HEIGHTS NY 10598

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 EXEC TERRITORY SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8738849871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANNLEA C C RUMFOLA

Mailing Address 8314 DAVINGTON DR

City State Zip Code
 DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8738859871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN A FIACCO

Mailing Address 124 FOX HAVEN DRIVE

City State Zip Code
 O'FALLON MO 63368

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, PHARM OPS MGMT -

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8738869871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. **TED L DIBIASE**

Mailing Address 4954 ROSEGATE COURT

City State Zip Code
 DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ORG HEALTH & LAB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8738949871

Amount of Each Receipt this Period

122.40

P/R Deduction (\$61.20 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **JOSHUA T T GAINES**

Mailing Address 2629 BEXLEY PARK ROAD

City State Zip Code
 BEXLEY OH 43209

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, STRATEGY & CORP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8738969871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **GEORGE J J PLAVA**

Mailing Address 3526 PEMBROOKE DR

City State Zip Code
 RICHMOND TX 77406

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.61

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8739039871

Amount of Each Receipt this Period

138.46

P/R Deduction (\$69.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

360.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. ROBERT S S SUMMERS

Mailing Address 146 CHASELY CIRCLE

City
POWELL

State Zip Code
OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739059871

Amount of Each Receipt this Period

61.44

P/R Deduction (\$30.72 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SEAN M MCCAFFREY

Mailing Address 1020 BUCK RUN RD

City
SOUTHPOINTE

State Zip Code
PA 15317

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739079871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GARY G CACCIATORE

Mailing Address 3810 LOCH GLEN CT

City
HOUSTON

State Zip Code
TX 77059

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, ASC GEN CSL, REG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739199871

Amount of Each Receipt this Period

75.98

P/R Deduction (\$37.99 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

213.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. JAMES L SCOTT

Mailing Address 9318 PRATOLINA VILLA DRIVE

City State Zip Code
DUBLIN OH 43016

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, NATIONAL MARKET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8739229871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. BRADLEY G G COCHRAN

Mailing Address 2589 AIKIN CIRCLE S

City State Zip Code
LEWIS CENTER OH 43035

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8739249871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM OWAD

Mailing Address 7558 HEATHERWOOD LN

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8739259871

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

376.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. CRAIG P COWMAN

Mailing Address 6851 KILLILEA DRIVE

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
SVP, PRODUCT MANAGEM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739319871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARGARET M T M LAVALLE

Mailing Address 9410 CULROSS CT

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
SVP, HR SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739359871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL C C KAUFMANN

Mailing Address 7160 TEMPERANCE POINT ST

City State Zip Code
WESTERVILLE OH 43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
CEO, PHARMACEUTICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739389871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

584.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. PETER A STOY

Mailing Address 1955 ENCLAVE DRIVE

City State Zip Code
 MT PLEASANT SC 29464

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8739429871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KEVIN M KANNALLY

Mailing Address 14529 ROBINSON RD

City State Zip Code
 PLAIN CITY OH 43064

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8739479871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL P P KENNEDY

Mailing Address 4783 VISTA RIDGE DR

City State Zip Code
 DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 SVP, COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.10

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8739509871

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

352.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. CAROLYN E E GRANT

Mailing Address 6869 MEADOW GLEN DR

City
WESTERVILLE

State Zip Code
OH 43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
DIR, GOVERNMENT REL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8739549871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TROY L HANSON

Mailing Address 5622 DORSEY DRIVE

City
COLUMBUS

State Zip Code
OH 43235

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8739589871

Amount of Each Receipt this Period

92.18

P/R Deduction (\$46.09 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CASSANDRA E RA E BAKER

Mailing Address 1751 BARRINGTON RD

City
UPPER ARLINGTON

State Zip Code
OH 43221

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, GOVT RELATIONS M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8739649871

Amount of Each Receipt this Period

134.32

P/R Deduction (\$67.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

302.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. JAMES M BARKER

Mailing Address 2761 SKELTON LN

City State Zip Code
 BLACKLICK OH 43004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, MANUFACTURING MG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8739669871

Amount of Each Receipt this Period

70.30

P/R Deduction (\$35.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEPHEN T T FALK

Mailing Address 2175 LANE RD

City State Zip Code
 COLUMBUS OH 43220

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 EVP & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8739669871

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CAROLE S S WATKINS

Mailing Address 1967 WOODLANDS PLACE

City State Zip Code
 POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 CHIEF HUMAN RESOURCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8739729871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

654.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. JON GIACOMIN

Mailing Address 6792 INGALLS CT

City State Zip Code
 GALENA OH 43021

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 PRES, US PHARMACEUTI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8739749871

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT GIACALONE

Mailing Address 7471 BALFOURE CIRCLE

City State Zip Code
 DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 SVP, REG AFFAIRS/CHF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8739789871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL D D BROWN

Mailing Address 3103 SADDLE RIDGE

City State Zip Code
 RICHMOND TX 77406

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8739829871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

326.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. KATHRYN J J ABLEIDINGER

Mailing Address 34 ASHBURY CT

City
HUDSON

State Zip Code
WI 54016

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739909871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DANIEL R R ROBINSON

Mailing Address 8124 CROOKED OAKS CT

City
GAINESVILLE

State Zip Code
VA 20155

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
DIR, PHARM OPS & ACC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739919871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STEPHEN M LAWRENCE

Mailing Address 4868 CARRIGAN RIDGE

City
DUBLIN

State Zip Code
OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
SVP, RETAIL INDEPEND

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8739929871

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

352.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. DAVID LAWRENCE

Mailing Address 326 VINWOOD LANE

City State Zip Code
 POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGIC PLNG/E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8739949871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARK E ROSENBAUM

Mailing Address 815 HAMMOCK LANE

City State Zip Code
 KNOXVILLE TN 37934

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

CHIEF CUSTOMER OFFIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8739959871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID E GAJESKI

Mailing Address 21406 SAUNTON DR

City State Zip Code
 KATY TX 77450

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8740039871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

560.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. CONNIE WOODBURN

Mailing Address 9761 ERIN WOODS DR

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PROF & GOVT REL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8740159871

Amount of Each Receipt this Period

270.00

P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBBIE D D JORGENSEN

Mailing Address 578 MORTS DRIVE

City State Zip Code
WENTZVILLE MO 63385

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8740169871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BLAIR R WILLIAMS

Mailing Address 663 LYNNFIELD DR

City State Zip Code
WESTERVILLE OH 43081

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8740319871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

422.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. ANDREW R R KELLER

Mailing Address PO BOX 3732

City

DUBLIN

State

OH

Zip Code

43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8740339871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ERIC M JOHNSON

Mailing Address 8078 TRAIL LAKE DR

City

POWELL

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, FINANCE (GENERAL)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8740409871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARC D DELORENZO

Mailing Address 231 TILLER DRIVE

City

POWELL

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8740499871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM B B CHRISTIAN

Mailing Address 3325 LITTLEPORT LANE

City State Zip Code
 ACWORTH GA 30101

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8740539871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARY W BAXTER

Mailing Address 3913 REGAL COURT

City State Zip Code
 VIRGINIA BEACH VA 23452

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8740559871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN S LINDSEY

Mailing Address 50 TIMBERKNOLL LOOP

City State Zip Code
 POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, ENTERPRISE INFR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8740679871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 26 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. JAMES E BACH

Mailing Address 26061 TWIN POND RD

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8740699871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN J BYRNES

Mailing Address 161 TUCKER DR

City State Zip Code
 WORTHINGTON OH 43085

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, TAX TECHNICAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8740769871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KENNETH H H ROBINETTE

Mailing Address 9409 AVEMORE CT.

City State Zip Code
 DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, OPERATIONAL EXCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : PR8740789871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

228.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. BENNY SLEDGE

Mailing Address 8016 W 138TH TERRACE

City State Zip Code
OVERLAND PARK KS 66223

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP,BUSINESS ACQUISIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8740899871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JAMES W HILLMAN

Mailing Address 141 WOODSTREAM DR

City State Zip Code
GRAND ISLAND NY 14072

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8740909871

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL A A MONE

Mailing Address 4909 SCENIC CREEK DR

City State Zip Code
POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, ASC GEN CSL, REG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8740959871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

212.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 44

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. MARTHA HUSTON

Mailing Address 490 E. SUNBURST LN

City State Zip Code
 TEMPE AZ 85284

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HSS CUSTOMER SU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8741019871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANDREW T T ALDERMAN

Mailing Address 1225 LEICESTER PL.

City State Zip Code
 COLUMBUS OH 43235

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, STRATEGY & BUS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8741059871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SHELLEY A A BIRD

Mailing Address 7998 CARAWAY AVE

City State Zip Code
 DUBLIN OH 43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8741069871

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

376.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. ISMAEL VILLARREAL

Mailing Address 5032 CALLE TINTILLO

City State Zip Code
GUAYNABO PR 00966

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
CARDINAL HEALTH, INC VP, OPERATIONS MGMT

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8741109871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JESSICA L L MAYER

Mailing Address 4852 CARRIGAN RIDGE

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
CARDINAL HEALTH, INC VP, ASC GEN CSL, COM

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8741179871

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN C RADEMACHER

Mailing Address 5006 ROSALIND LANE

City State Zip Code
POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
CARDINAL HEALTH, INC PRESIDENT, AMBULATOR

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2014

Transaction ID : PR8741489871

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

336.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. DIANNE RADIGAN

Mailing Address 900 EASTCHESTER DR

City State Zip Code
 GAHANNA OH 43230

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 CARDINAL HEALTH, INC VP, COMMUNITY RELATI

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 31 2014

Transaction ID : PR8741519871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SALLY CURLEY

Mailing Address 9035 ESIN COURT

City State Zip Code
 POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 CARDINAL HEALTH, INC SVP, INVESTOR RELATI

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 31 2014

Transaction ID : PR8741529871

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GEORGE S S BARRETT

Mailing Address 246 E. SYCAMORE ST.

City State Zip Code
 COLUMBUS OH 43206

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 CARDINAL HEALTH, INC CHAIRMAN/CEO, CARDIN

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y
 03 31 2014

Transaction ID : PR8741539871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

610.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. MARK PILKINGTON

Mailing Address 8191 HILLINGDON DRIVE

City State Zip Code
 POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, STRATEGY MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 31 / 2014

Transaction ID : PR8741589871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CRAIG MORFORD

Mailing Address 5565 LAKE SHORE AVE,

City State Zip Code
 WESTERVILLE OH 43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 CHIEF COMPLIANCE & L

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

03 / 31 / 2014

Transaction ID : PR8741599871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. HENRY M CHILTON

Mailing Address 32 PALISADES PARKWAY

City State Zip Code
 OAK RIDGE TN 37830

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CARDINAL HEALTH, INC

Occupation
 VP, SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

03 / 31 / 2014

Transaction ID : PR8741729871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

560.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM S S CLAUNCH

Mailing Address 10744 CAMPDEN LAKES BLVD

City State Zip Code
DUBLIN OH 43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONS SERVI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8741739871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LUKE C AUGUSTINE

Mailing Address 10834 S 166TH ST

City State Zip Code
OMAHA NE 68136

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8741749871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARC B MULLEN

Mailing Address 1650 SHERBORNE LANE

City State Zip Code
POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8741859871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

276.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA A MORRISON

Mailing Address 55 EAST ERIE
#3801

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
EVP, CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8742069871

Amount of Each Receipt this Period

242.30

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARK BLAKE

Mailing Address 129 NORWOOD AVE

City State Zip Code
MONTCLAIR NJ 07043

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
EVP, STRATEGY & CORP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8742099871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GILBERTO O QUINTERO

Mailing Address 6650 BRODIE BLVD

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
SVP, QRA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8742129871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

702.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. LANE CHERAMIE

Mailing Address 152 WEST 117TH STREET

City State Zip Code
CUT OFF LA 70345

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HEALTH SYSTEM P

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8742169871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT WELLS

Mailing Address 301 BRIDLE PATH LANE

City State Zip Code
ANNAPOLIS MD 21403

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8742209871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MEGHAN FITZGERALD

Mailing Address 6 MORGAN

City State Zip Code
NORWALK CT 06851

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, SPECIALTY SOLU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : PR8742289871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

252.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. DANIEL MOVENS

Mailing Address 987 RETREAT LANE

City State Zip Code
 POWELL OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP/GM, PARMED PHARM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8742319871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. NICHOLAS S AUGUSTINOS

Mailing Address 2416 15TH STREET

City State Zip Code
 SAN FRANCISCO CA 94114

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HEALTH INFO & S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR8742419871

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SHAUN F YOUNG

Mailing Address 8145 SUMMERHOUSE DRIVE WEST

City State Zip Code
 DUBLIN OH 43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MKTG & PRODUCT M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : PR9340949871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. KELLY B WILSON

Mailing Address 4556 SATTERTON CIRCLE

City State Zip Code
DUBLIN OH 43016

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR BUSINESS PART

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

03 / 31 / 2014

Transaction ID : PR9368929871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DEBBIE J J MITCHELL

Mailing Address 9 ALBAN MEWS

City State Zip Code
NEW ALBANY OH 43054

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PUBLIC RELATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 31 / 2014

Transaction ID : PR9408999871

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT KULIS

Mailing Address 14 ROSY FINCH PLACE

City State Zip Code
THE WOODLANDS TX 77389

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM PHARMACY SOL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2014

Transaction ID : PR9409029871

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

226.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. DONALD M CASEY

Mailing Address 7708 TILLINGHAST DRIVE

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
CEO, MEDICAL SEGMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1346.10

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2014

Transaction ID : PR9413439871

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SHAUNA M LATSHAW

Mailing Address 6069 TOURNAMENT DRIVE

City State Zip Code
WESTERVILLE OH 43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARDINAL HEALTH, INC

Occupation
VP, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2014

Transaction ID : PR9950519871

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

460.60

11569.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Bob Goodlatte For Congress

Mailing Address P.O. Box 3591

City	State	Zip Code
Alexandria	VA	22302

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Robert GoodlatteOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : 8047218

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Dave Joyce

Mailing Address 217 Third St SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. David JoyceOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : 8047219

Amount of Each Disbursement this Period

2000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Guthrie for Congress

Mailing Address PO Box 9639

City	State	Zip Code
Bowling Green	KY	42102

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Brett GuthrieOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : 8047221

Amount of Each Disbursement this Period

2500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Democrats Win Seats PACMailing Address 412 1st ST SE
STE 100

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

Candidate Name

Democrats Win Seats PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : 8047222

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Whitfield for Congress

Mailing Address 499 South Capitol Street SW Ste 42

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Edward WhitfieldOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : 8047223

Amount of Each Disbursement this Period

1000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Texans For Senator John Cornyn Inc

Mailing Address 1020 North Fairfax Street, Ste 201

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

Candidate Name

Sen. John CornynOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : 8047224

Amount of Each Disbursement this Period

2500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Kevin McCarthy for Congress

Mailing Address 213 Ashby St.

City Alexandria	State VA	Zip Code 22305
--------------------	-------------	-------------------

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Kevin McCarthyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2014

Transaction ID : 8047225

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Friends of Sherrod BrownMailing Address PO Box 76187
Suite 800

City Washington	State DC	Zip Code 20013
--------------------	-------------	-------------------

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Sen. Sherrod BrownCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

Transaction ID : 8059625

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Latta for Congress

Mailing Address 900 19th Street NW 8th Fl

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Robert LattaCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

Transaction ID : 8059626

Amount of Each Disbursement this Period

5000.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Scalise For Congress

Mailing Address PO Box 23219

City
JeffersonState
LAZip Code
70183Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Steve ScaliseCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2014

Transaction ID : 8059627

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

B. Friends of Erik PaulsenMailing Address P.O. Box 44369
250 Prairie Center DriveCity
Eden PrairieState
MNZip Code
55344Purpose of Disbursement
Direct Contribution

011

Candidate Name

Rep. Erik P. PaulsenCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : 8073591

Amount of Each Disbursement this Period

2500.00

Direct Contribution

Full Name (Last, First, Middle Initial)

C. Tim Scott for Senate

Mailing Address 1405 Ashley River Road

City
CharlestonState
SCZip Code
29407Purpose of Disbursement
Direct Contribution

011

Candidate Name

Sen. Tim ScottCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : 8073592

Amount of Each Disbursement this Period

2500.00

Direct Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

35000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Stephanie Kunze

Mailing Address 865 Macon Alley

City Columbus	State OH	Zip Code 43206
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Purpose of Disbursement
Stephanie Kunze, STATE HOUSE 24th OH

Candidate Name

Stephanie KunzeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

Transaction ID : 8088428

Amount of Each Disbursement this Period

1000.00

Stephanie Kunze, STATE HOUSE 24th OH

Full Name (Last, First, Middle Initial)

B. Pelanda for State Representative

Mailing Address 4679 Winterset Dr.

City Columbus	State OH	Zip Code 43220
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Purpose of Disbursement
Dorothy Pelanda, STATE HOUSE 86th OH

Candidate Name

OH Rep. Dorothy PelandaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 86

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

Transaction ID : 8088429

Amount of Each Disbursement this Period

1000.00

Dorothy Pelanda, STATE HOUSE 86th OH

Full Name (Last, First, Middle Initial)

C. Committee to Elect Jeff McClain

Mailing Address 428 S Sandusky Ave

City Upper Sandusky	State OH	Zip Code 43351
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Purpose of Disbursement
Jeffrey McClain, STATE HOUSE 87th OH

Candidate Name

OH Rep. Jeffrey McClainOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 87

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

Transaction ID : 8088430

Amount of Each Disbursement this Period

1000.00

Jeffrey McClain, STATE HOUSE 87th OH

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 44

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

A. Friends of Ryan Smith

Mailing Address 1661 Kemper Hollow Rd

City Gallipolis	State OH	Zip Code 45631
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Purpose of Disbursement
Ryan Smith, STATE HOUSE 93rd OH

Candidate Name

Ryan SmithOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 93

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : 8088431

Amount of Each Disbursement this Period

1000.00

Ryan Smith, STATE HOUSE 93rd OH

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

4000.00
